| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | <u></u> |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name | Latia | |
| Write the name that is on | First name | First name |
| your government-issued picture identification (for example, your driver's | Middle name Simmons | Middle name |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last 8 years | First name | First name |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 | XXX - XX- 3141 | XXX - XX- |
| digits of your Social Security number or federal | OR | OR |
| Individual Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| De | ebtor 1 Latia | Simmons | Case number (if known) | | | |
|----------------|---|---|--|--|--|--|
| | First Name | Middle Name Last Name | | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
| 4. | Any business names and Employer | ✓ I have not used any business names or EINs. | I have not used any business names or EINs. Business name | | | |
| | Identification Numbers (EIN) you have used in the | Business name | | | | |
| | last 8 years | Business name | Business name | | | |
| | Include trade names and doing business as names | EIN | EIN | | | |
| | | EIN | EIN | | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | | |
| | | 7517 S. Yale Ave Number Street | Number Street | | | |
| | | Chicago Illinois 60620 | | | | |
| | | City State Zip Code Cook | City State Zip Code | | | |
| | | County | County | | | |
| | | • | | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number Street | Number Street | | | |
| | | | | | | |
| | | City State Zip Code | City State Zip Code | | | |
| 6. | Why you are choosing this | Check one: | Check one: | | | |
| | district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| - - | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Debtor 1 Latia | | | Case number (if know | n) |
|---|---|--|--|---|
| First Name | | Name | | |
| Part 2: Tell the Court Ab | out Your Bankruptcy Case | | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description of each B2010)). Also, go to the top of page 1 and Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | (b) for Individuals Filing for Bankruptcy (Form |
| 8. How you will pay the fee | court for more details about he may pay with cash, cashier's on your behalf, your attorney I need to pay the fee in instandividuals to Pay Your Filing I request that my fee be wait By law, a judge may, but is not less than 150% of the official | now you may pay. To check, or money of may pay with a creek rallments. If you check fee in Installments (ived (You may required to, waive poverty line that apu choose this option | ypically, if you rder If your a dit card or checoose this option Official Form 10 est this option of your fee, and oplies to your fan, you must fill of the results. | n, sign and attach the Application for D3A). Only if you are filing for Chapter 7. may do so only if your income is mily size and you are unable to pay out the Application to Have the |
| 9. Have you filed for bankruptcy within the last 8 years? | ✓ No. ☐ Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No. Yes. Debtor District Debtor District | When When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. Go to line 12. ☐ Yes. Has your landlord obtained an of the line 12. ☐ No. Go to line 12. ☐ Yes. Fill out <i>Initial Statem</i> this bankruptcy petiti | ent About an Eviction Jud | | nt to stay in your residence? (Form 101A) and file it with |

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| Debtor 1 Latia First Name | | N/ | liddle Name | Simmons Last Name | Case number (if know | n) | |
|--|--|--|---|--|---|--|---------------------------------------|
| | bout Any B | | ses You Own as a S | | | | |
| 12. Are you a sol proprietor of full- or part-t business? A sole proprietis a business operate as an individual, and a separate legentity such as corporation, partnership, outlier of the proprietorship separate sheet attach it to thi petition. | e any ime corship you dis not al a a r LLC. | No. | Go to Part 4. Name and location of both Name of business, if and Number City Check the appropriate Health Care Bu Single Asset Re | Street Street Solution to describe your siness (as defined in all Estate (as defined defined in 11 U.S.C. ker (as defined in 11 U.S.C. | 11 U.S.C. § 101(27A)) in 11 U.S.C. § 101(51B)) § 101(53A)) | Zip Code | |
| 13. Are you filing Chapter 11 or Bankruptcy (and are you a business del For a definition small business debtor, see 11 § 101(51D). | f the de Code op | eadlines. I perations, .S.C. § 11 No. | If you indicate that you are a cash-flow statement, and 16(1)(B). I am not filing under Ch I am filing under Chapt Bankruptcy Code. | a small business debt federal income tax re napter 11. eer 11, but I am NOT a | ather you are a small busine or, you must attach your mo- urn or if any of these docun a small business debtor acc | st recent balance sheet, nents do not exist, follow cording to the definition in | statement of v the procedure in 11 |
| Part 4: Report if | You Own o | or Have | Any Hazardous Pro | operty or Any P | operty That Needs I | mmediate Attentic | on |
| 14. Do you own any property poses or is a to pose a three imminent and identifiable he to public hea safety? Or do own any properthat needs immediate | that Ileged eat of d azard of you | _ | What is the hazard? If immediate attention is a Where is the property? | needed, why is it need | led? Street | | |
| attention? For example, or own perishable or livestock the be fed, or a but that needs urgrepairs? | e goods, at must uilding | | | City | State | Zip |) Code |

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Debtor 1 Latia Simmons Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of

credit counseling with the court.

about credit counseling, you must file a motion for waiver of

credit counseling with the court.

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| 16. What kind of debts do you have? 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily business debts? Business or investment or through the personal, family, or household purpose." 101(8) as "individual primarily business debts? Business or inve | Debtor 1 Latia | | Simmons Case number (if kno | own) | | | | | |
|--|---|--|--|---|--|--|--|--|--|
| 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. | First Name Port 6: Answer Those Or | | | | | | | | |
| Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? In No. | 16. What kind of debts | 16a. Are your debts primarily 101(8) as "incurred by an No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily obtain money for a busine investment. No. Go to line 16c. Yes. Go to line 17. | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. | | | | | | |
| do you estimate that you owe? □ 50-99 □ 5,001-10,000 □ 50,001-100,000 □ 50,001-100,000 □ 50,001-100,000 □ 50,001-100,000 □ 50,001-100,000 □ 50,001-100,000 □ 50,001-100,000 □ 50,001-100,000 □ 50,001-100,000 □ 50,001-100,000 □ 50,001-100 million □ \$500,000,001-\$1 billion □ \$10,000,000,001-\$10 million □ \$10,000,000,001-\$50 billion □ \$10,000,000,001-\$50 billion □ \$500,001-\$1 million □ \$10,000,001-\$10 million □ \$10,000,000,001-\$1 billion □ \$500,000,001-\$1 billion □ \$10,000,001-\$10 million □ \$500,000,001-\$1 billion □ \$10,000,001-\$10 million □ \$10,000,001-\$10 million □ \$10,000,000,001-\$10 billion □ \$10,000,000,000,001-\$10 billion □ \$10,000,000,000,000,001-\$10 billion □ \$10,000,000,000,000,000,000,000,000,000, | Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to | Tall the limit of the last that will be available to distribute to unsecured creditors? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? No. No. Yes. | | | | | | | |
| estimate your assets to be worth? \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion \$10,000,000,001-\$10 million | do you estimate that | e that 50-99 100-199 | 5,001-10,000 | 50,001-100,000 | | | | | |
| estimate your \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion | estimate your assets | \$50,001-\$100,000 \$100,001-\$500,000 | \$10,000,001-\$50 million \$50,000,001-\$100 million | \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion | | | | | |
| \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion | | \$50,001-\$100,000 \$100,001-\$500,000 | \$10,000,001-\$50 million \$50,000,001-\$100 million | \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion | | | | | |
| Part 7: Sign Below | Part 7: Sign Below | v | | | | | | | |
| I have examined this petition, and I declare under penalty of perjury that the information provided is to and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition I understand making a false statement, concealing property, or obtaining money or property by fraud connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** /s/ Latia Simmons Signature of Debtor 1 Executed on Executed on Executed on | For you | and correct. If I have chosen to file under C 11,12, or 13 of title 11, United S choose to proceed under Chapilf no attorney represents me at me fill out this document, I have I request relief in accordance will understand making a false state connection with a bankruptcy of years, or both. 18 U.S.C. §§ 15 /s/ Latia Simmons Signature of Debtor 1 | Chapter 7, I am aware that I may prostates Code. I understand the relief ofter 7. Ind I did not pay or agree to pay son we obtained and read the notice requivith the chapter of title 11, United Statement, concealing property, or obcase can result in fines up to \$250,052, 1341, 1519, and 3571. | oceed, if eligible, under Chapter 7, available under each chapter, and I meone who is not an attorney to help uired by 11 U.S.C. § 342(b). tates Code, specified in this petition. taining money or property by fraud in 1000, or imprisonment for up to 20 | | | | | |

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| Debtor 1 Latia | | Simmons | Case number (ii | f known) |
|---|--|--|--|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not | eligibility to proceed up the relief available und to the debtor(s) the no | nder Chapter 7, 11, 12 der each chapter for v tice required by 11 U. | 2, or 13 of title 11, Ur which the person is e S.C. § 342(b) and, in | nat I have informed the debtor(s) about nited States Code, and have explained ligible. I also certify that I have delivered a case in which § 707(b)(4)(D) applies, ation in the schedules filed with the |
| need to file this page. | Sean McNulty Signature of Attorney Sean McNulty Printed name | for Debtor | Date _ | 10/25/2016 MM / DD / YYYY |
| | Semrad Law Firm Firm name 11101 S. Western Ave | nue | | |
| | Chicago City | | Illinois State | 60643 Zip Code |
| | Contact phone | 555555555 | Email address | smcnulty@semradlaw.com |
| | | | Illino | is |
| | Bar number | | State | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|
| Debtor 1 | Latia | | Simmons | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if fili | ^{ng)} First Name | Middle Name | Last Name | | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| | | | (State) | | | | |
| Case number (If known) | | | | | | | |

| Check if this is ar |
|---------------------|
| amended filing |

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|--------------------------------------|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$2,600.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$2,600.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$8,785.00 |
| Your total liabilities | \$8,785.00 |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | <u>\$1,871.42</u> |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J | \$1,696.00 |
| | |

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| Deb | otor 1 Latia | | Simmons | Case number (if known) | |
|-------------|--|---|-------------------------------------|---|------------|
| | First Name | Middle Name | Last Name | | |
| Part | 4: Answer These | e Questions for Administr | ative and Statistical Rec | cords | |
| 6. A | re you filing for bank | ruptcy under Chapters 7, 11, or | 13? | | |
| [| _ | ng to report on this part of the form. | . Check this box and submit this fo | form to the court with your other schedules | • |
| | ✓ Yes. | | | | |
| 7. V | Vhat kind of debt do | you have? | | | |
| [| | imarily consumer debts. Consund purpose. 11 U.S.C. § 101(8). Fill (| | an individual primarily for a personal, oses. 28 U.S.C. § 159. | |
| [| | ot primarily consumer debts. You rt with your other schedules. | u have nothing to report on this pa | art of the form. Check this box and submit | |
| | | of Your Current Monthly Incom DR, Form 122B Line 11; OR, Form | | nly income from Official | \$1,136.67 |
| 9. | Copy the following | special categories of claims fror | m Part 4, line 6 of Schedule E/ | F: | |
| | From Part 4 on Scho | edule E/F, copy the following: | | Total claim | |
| | 9a. Domestic support | obligations (Copy line 6a.) | | \$0.00 | |
| | 9b. Taxes and certain | other debts you owe the governmen | \$0.00 | | |
| | 9c. Claims for death o | \$0.00 | | | |
| | 9d. Student loans. (Co | \$0.00 | | | |
| | 9e. Obligations arising priority claims. (Copy | g out of a separation agreement or | | | |
| | . , , , , , | or profit-sharing plans, and other si | milar debts. (Copy line 6h.) | \$0.00 | |
| | On Total Add lines 0 | a through Of | | 00.02 | |

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| Debtor 1 | | Latia | • | | Simmons | | | | |
|---------------------------------------|-------------------------|---|--|-------------------------|---|----------------------|----------|---|---|
| | | First Name | Middle N | lame | Last Name | | | | |
| Debtor 2 | if filing) | - | | | | | | | |
| (Spouse, | ii iiiing, | First Name | Middle N | lame | Last Name | | | | |
| United Sta | ates Ba | ankruptcy Court for the: | Northern | | District of Illinois | | | | |
| Case nun (If known) | nber | | | | (State) | | | | |
| Officia | al Fo | orm 106A/B | | | | | | | Check if this is an amended filing |
| Sche | dul | e A/B: Prope | erty | | | | | | 12/1 |
| category v responsib write your | where le for name | you think it fits best. B supplying correct info and case number (if kr | e as complete and rmation. If more s nown). Answer eve | d acc space ery q | set only once. If an asset fits urate as possible. If two marri is needed, attach a separate uestion. I, or Other Real Estate | ied peop sheet to | e are t | filing together, both are or or or any a | equally dditional pages, |
| | | | | | residence, building, land, or s | | | | |
| | No. G | or nave any legal of ed to to Part 2 Where is the property? | ultable lillerest lil | any | esidence, building, land, or s | iiiiiai pi | oper ty | : | |
| 1.1 | Stree | t address, if available, or | other description | | at is the property? Check all the Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | nat apply. | | the amount of any secure | laims or exemptions. Put ed claims on Schedule D: nims Secured by Property. Current value of the portion you own? |
| | Numb | | 7in Codo | Ħ | Land nvestment property Timeshare Other | | | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | City | State | Zip Code | Who | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a | · | ck | Check if this is co (see instructions) | mmunity property |
| | | | | | er information you wish to ad perty identification number: | | this ite | em, such as local | |
| If you | own or | have more than one, list | here: | | | | | | |
| 1.2 | Stree | t address, if available, or | other description | | at is the property? Check all the Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | nat apply. | | the amount of any secure | laims or exemptions. Put ad claims on Schedule D: hims Secured by Property. Current value of the portion you own? |
| | | | | | _and | | | | |
| | Numb | per Street State | Zip Code | Ħ | nvestment property Timeshare Other | | | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | S.I.y | | _ p | one. | to has an interest in the properties Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | erty? Che | ck | Check if this is con (see instructions) | mmunity property |
| | | | | Oth | At least one of the debtors and an er information you wish to ad | | this ite | em, such as local | |

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| Debtor 1 | Latia First Name | Middle Name | Simmons Last Name | Case number | (if known) | |
|--------------------------------|--|---|--|-----------------|--|--|
| 1.3 Stre | et address, if available, or oth | | What is the property? Check all that appl Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | ly. | Do not deduct secured cl the amount of any secure Creditors Who Have Cla Current value of the entire property? | · · · · · · · · · · · · · · · · · · · |
| Nun City | nber Street State | Zip Code | Land Investment property Timeshare Other | | Describe the nature of interest (such as fee sit the entireties, or a life | mple, tenancy by |
| | |]]] | Who has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about | | Check if this is cor (see instructions) | mmunity property |
| | | ion you own for a | property identification number: all of your entries from Part 1, including e | | | |
| Do you ov you own th | at someone else drives. If you ns, trucks, tractors, sport utilit | quitable interest in lease a vehicle, als | n any vehicles, whether they are registes or report it on Schedule G: Executory Controckes | | | |
| | Make Model: Year: | Honda Accord 1999 | Who has an interest in the property one. Debtor 1 only | y? Check | Do not deduct secured of the amount of any secure Creditors Who Have Cla | • |
| | Approximate mileage: Other information: | 150000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Check if this is community propinstructions) | | Current value of the entire property? \$1825.00 | Current value of the portion you own? \$1825.00 |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the property one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano | | Do not deduct secured of the amount of any secure Creditors Who Have Clate Current value of the entire property? | • |
| | | | Check if this is community proprinstructions) | | | |

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| ebtor 1 | | Simmons Case number | r (if known) | |
|---------|--|---|---|--|
| | First Name Middle Nar | ne Last Name | | |
| 3.3 | Make | Who has an interest in the property? Check | | laims or exemptions. Put |
| | Model: | one. | • | ed claims on Schedule D: |
| | Year: | _ Debtor 1 only | Creditors who have Cit | aims Secured by Property |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and another | | |
| | | Check if this is community property (see instructions) | | |
| 3.4 | Make | Who has an interest in the property? Check | Do not deduct secured of | laims or exemptions. Put |
| | Model: | one. | the amount of any secure | ed claims on Schedule D: |
| | Year: | _ Debtor 1 only | Creditors Who Have Cla | aims Secured by Property |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and another | | |
| | | Check if this is community property (see instructions) | | |
| 4.1 | Make Model: | Who has an interest in the property? Check one. | Do not deduct secured of the amount of any secure | |
| | Year: | Debtor 1 only | | aims Secured by Propert |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and another | | |
| | | Check if this is community property (see instructions) | | |
| 4.2 | Make | Who has an interest in the property? Check | Do not deduct secured of | laims or exemptions. Put |
| | Model: | one. | • | |
| | Year: | | Creditors Who Have Cla | ed claims on <i>Schedule D</i> : |
| | | Debtor 1 only | | ed claims on <i>Schedule D</i> : |
| | Approximate mileage: | Debtor 1 only Debtor 2 only | Current value of the | ed claims on <i>Schedule D:</i> |
| | Approximate mileage: Other information: | · | Current value of the entire property? | ed claims on Schedule Diaims Secured by Propert |
| | • | Debtor 2 only | | ed claims on Schedule D: aims Secured by Property Current value of the |
| | • | Debtor 2 only Debtor 1 and Debtor 2 only | | ed claims on Schedule Daims Secured by Propert |
| 5. Add | Other information: | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | entire property? | ed claims on Schedule Daims Secured by Propert Current value of the |

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| Debtor 1 | | AC 18 A1 | Simmons | Case number (if known) | |
|-----------------------|------------------------------|--|------------------------------|--------------------------------|--|
| | First Name | Middle Name | Last Name | | |
| | | our Personal and Household ave any legal or equitable inte | | ollowing items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | - | and furnishings liances, furniture, linens, china, kitchenw | <i>y</i> are | | |
| = | escribe | Misc. Household Goods | | | \$350.00 |
| 7. Electro Example No | | s and radios; audio, video, stereo, and d | igital equipment; computers | s, printers, scanners; music | |
| ✓ Yes. D | escribe | Misc. Electronics | | | \$125.00 |
| | • | ue and figurines; paintings, prints, or other a in, or baseball card collections; other co | · | • | |
| Yes. D | escribe | | | | |
| Example No | es: Sports, ph | orts and hobbies otographic, exercise, and other hobby e s; carpentry tools; musical instruments | quipment; bicycles, pool tab | oles, golf clubs, skis; canoes | |
| 100. D | 0001100 | | | | |
| 10. Firea Example | | es, shotguns, ammunition, and related e | equipment | | |
| ✓ No | | | | | _ |
| Yes. D | escribe | | | | |
| _ | | clothes, furs, leather coats, designer wea | ar, shoes, accessories | | |
| No ✓ Yes. D | escribe | Used Clothing | | | |
| 100.2 | 0001100 | Osca Oloming | | | \$225.00 |
| 12. Jewel Example | | ewelry, costume jewelry, engagement rin er | gs, wedding rings, heirloon | n jewelry, watches, gems, | |
| ✓ Yes. D | escribe | Misc. Jewelry | | | \$50.00 |
| | farm animal es: Dogs, cat | s s, birds, horses | | | |
| | escribe | | | | |
| 14. Any | other persor | nal and household items you did not | already list, including any | y health aids you did not list | |
| ✓ No | | | | | |
| Yes. D | escribe | | | | |
| | | lue of all of your entries from Part 3, number here | | _ | \$750.00 |

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| Debt | | Middle Name | Last Name | Case number (# known) | |
|--------------|--|--|--------------------------------|----------------------------------|--|
| Part 4 | First Name | Financial Assets | Last Name | | |
| | | any legal or equitable inte | erest in any of the follow | ring? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. C | xamples: Money you hav | e in your wallet, in your home, in a s | | en you file your petition Cash: | \$25.00 |
| | | avings, or other financial accounts; stitutions. If you have multiple acco | | credit unions, brokerage houses, | |
| | | 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: | | | |
| | | 17.8. Other financial account:17.9. Other financial account: | | | |
| | | or publicly traded stocks nvestment accounts with brokerage Institution or issuer name: | e firms, money market accounts | | |
| | Non-publicly traded stan LLC, partnership, which is not a large state of the control of the cont | tock and interests in incorporate and joint venture Name of entity | ted and unincorporated busine | % of ownership: | |

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| Deb | tor 1 | Latia | | Simmons | Case number (if known) | |
|-----|----------|-------------------------|--|--|---------------------------------|---|
| 20 | Co | First Name | Middle Name | Last Name | monto | |
| 20. | | | orate bonds and other negotial nclude personal checks, cashiers' of the contract of the cont | | | |
| | | | nts are those you cannot transfer to | | | |
| | ✓ | No | | | | |
| | | Yes. Give specific | | | | |
| | | information about | Issuer name: | | | |
| | | them | | | | |
| | | | | | | |
| | | | | | _ | |
| 21. | | irement or pension | | | | |
| | Exa | imples: Interests in IR | A, ERISA, Keogh, 401(k), 403(b), | thrift savings accounts, or other p | pension or profit-sharing plans | |
| | | No | Type of account: | Institution name: | | |
| | Ш | Yes. List each account | 401(k) or similar plan: | mondion name. | | |
| | | separately. | , , | | | _ |
| | | | Pension plan: | | | |
| | | | IRA: | | | - |
| | | | Retirement account: | | | |
| | | | Keogh: | | | |
| | | | Additional account: | | | |
| | | | Additional account: | | | |
| 22. | | curity deposits and p | | | | |
| | You | r share of all unused o | deposits you have made so that you with landlords, prepaid rent, public | I may continue service or use from | a company | |
| | | npanies, or others | with landiords, propaid forti, public | dillilos (cicotrio, gas, water), telet | Communications | |
| | ✓ | No | | Institution name: | | |
| | | Yes | Electric: | | | |
| | | | Gas: | | _ | |
| | | | Heating oil: | | | |
| | | | Security deposit on rental unit: | | | |
| | | | Prepaid rent: | | | |
| | | | Telephone: | | _ | |
| | | | Water: | | | |
| | | | Rented furniture: | | | |
| | | | Other: | | | |
| 23. | Anı | nuities (A contract for | a periodic payment of money to yo | ou, either for life or for a number of | f years) | |
| | ✓ | No | | | | |
| | | Yes | Issuer name and description: | | | |
| | | | | | | |
| | | | | | | |
| | | | | | _ | _ |
| | | | | | | |

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| Debt | or 1 <u>Latia</u> First Name | Middle | e Name | Simmons Last Name | Case number (if known) | |
|------|--|--|--------------------|--|---|--|
| 24. | Interests in a | | count in a quali | | der a qualified state tuition program | |
| | ✓ No Yes | Institution name and descrip | otion. Separately | file the records of any interes | ts.11 U.S.C. § 521(c): | |
| | | | | | | |
| 25. | Trusts, equita | | property (other | than anything listed in line | e 1), and rights or powers | |
| | ✓ No | | | | | 7 |
| | Yes. Desc | ribe | | | | |
| 26. | | rights, trademarks, trade met domain names, website | • | ner intellectual property royalties and licensing agree | ements | |
| | ✓ No Yes. Desc | ribe | | | | |
| 27. | Licenses, fran | nchises, and other genera | ıl intangibles | | | |
| | | | | association holdings, liquor | licenses, professional licenses | |
| | Yes. Desc | ribe | | | | |
| | | | | | | |
| Mor | ney or prope | erty owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or prope Tax refunds ov | | | | | portion you own? Do not deduct secured |
| | Tax refunds ov | | | | | portion you own? Do not deduct secured |
| | Tax refunds ov | wed to you | | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds ov No Yes. Give s about you a | ved to you specific information them, including whether lready filed the returns | | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds ov No Yes. Give s about you a and th | specific information them, including whether lready filed the returns ne tax years | | | | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family suppor Examples: Past | pecific information them, including whether lready filed the returns t | pousal support, cl | nild support, maintenance, div | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family suppor Examples: Past | specific information them, including whether lready filed the returns he tax years | pousal support, cl | nild support, maintenance, div | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family suppor Examples: Past | pecific information them, including whether lready filed the returns t | pousal support, cl | nild support, maintenance, div | State: Local: vorce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family suppor Examples: Past | specific information them, including whether lready filed the returns he tax years | pousal support, cl | nild support, maintenance, div | State: Local: vorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family suppor Examples: Past | specific information them, including whether lready filed the returns he tax years | pousal support, cl | nild support, maintenance, div | State: Local: Vorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family suppor Examples: Past | specific information them, including whether lready filed the returns he tax years | pousal support, cl | nild support, maintenance, div | State: Local: Vorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov ✓ No Yes. Give s about you a and th Family suppor Examples: Past ✓ No Yes. Give s Other amounts Examples: Unpa | pecific information them, including whether lready filed the returns te tax years t due or lump sum alimony, s specific information | ce payments, disa | ability benefits, sick pay, vaca | State: Local: Vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family suppor Examples: Past No Yes. Give s Other amounts Examples: Unpa | pecific information them, including whether lready filed the returns te tax years t due or lump sum alimony, s specific information | ce payments, disa | ability benefits, sick pay, vaca | State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov ✓ No Yes. Give s about you a and th Family suppor Examples: Past ✓ No Yes. Give s Other amounts Examples: Unpa | pecific information them, including whether lready filed the returns te tax years t due or lump sum alimony, s specific information | ce payments, disa | ability benefits, sick pay, vaca | State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Latia | Simmons | Case number (if known) | |
|------|---|--|--|--|
| | First Name Middle Name | Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; health, disability, disability, or life insurance; health, disability, | alth savings account (HSA); credit, ho | omeowner's, or renter's insurance | |
| | ✓ No Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died. No Yes. Describe | | or are currently entitled to receive | |
| 33. | Claims against third parties, whether or not y Examples: Accidents, employment disputes, insu No Yes. Describe | | demand for payment | |
| 34. | Other contingent and unliquidated claims of to set off claims No Yes. Describe | every nature, including counterc | laims of the debtor and rights | |
| 35. | Any financial assets you did not already list No Yes. Describe | | | |
| 36. | Add the dollar value of all of your entries from Fart 4. Write that number here | , | | \$25.00 |
| Part | • | | | in Part 1. |
| 37. | Do you own or have any legal or equitable in | terest in any business-related prop | | _ |
| | No. Go to Part 6. Yes. Go to line 38. | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable or commissions you alre | eady earned | | |
| | Yes. Describe | | | |
| 39. | Office equipment, furnishings, and supplies Examples: Business-related computers, software No | | nines, rugs, telephones, desks, chairs, electr | onic devices |
| | Yes. Describe | | | |

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| Deb | tor 1 | Latia | \$4*** N | Simmons | Case number (if known) | |
|-------|----------|---|--|--|---------------------------------------|---------------------------------------|
| 40. | Ma | First Name Ichinery, fixtures, eq | Middle Name | Last Name use in business, and tools of yo | our trade | |
| | √ | No | , , ,, - pp you | , a 155.5 51 ye | · · · · · · · · · · · · · · · · · · · | |
| | | Yes. Describe | | | | |
| | | | | | | |
| 41. | Inv | ventory | | | | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | 1 |
| | | | | | | |
| 42. | | - | ips or joint ventures | | | |
| | ✓ | No | | Name of autitus | 0/ of own archine | |
| | | Yes. Give specific | | Name of entity: | % of ownership: | |
| | | information about them | | | | |
| | | | | | | |
| | | | | _ | | |
| 43. (| | | lists, or other compilat | ions | | |
| | | • | aluda paraanally idantifial | ole information (as defined in 11 U. | S C & 101/41A\\\2 | |
| | Н | res. Do your lists in | ciude personally identiliai | ole illioimation (as delilled ill 11 O. | 3.C. § 101(41A))! | |
| | | ☐ No | ,, | | | |
| | | Yes. Descr | ibe | | | |
| 44. | An | y business-related p | property you did not alro | eady list | | |
| | ✓ | No | | | | |
| | Ш | Yes. Give specific information | | | | |
| | | miorridaeri | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 45. A | dd t | the dollar value of a | II of your entries from F | art 5, including any entries for ہ | pages you have attached | |
| for P | art 5 | 5. Write that number | here | | • | |
| Part | t 6: | Describe Any F If you own or have an | Farm- and Commer in interest in farmland, list it | cial Fishing-Related Properin Part 1. | erty You Own or Have an Interes | t In. |
| 46. | Do | you own or have a | ny legal or equitable in | terest in any farm- or commercia | al fishing-related property? | |
| | ✓ | • | | | | Current value of the portion you own? |
| | | Yes. Go to line 47. | | | | Do not deduct secured |
| | | | | | | claims or exemptions |
| 47. | | rm animals | ultry form roland fich | | | |
| | | amples: Livestock, po | uiuy, rarm-raised fish | | | |
| | ¥ | No Yes. Describe | | | | 7 |
| | | 103. Describe | | | | |
| | | | | | | |

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| Deb | tor 1 | Latia | Middle Name | Simmons | Case number (if known) | |
|--------------|----------|-----------------------------------|--------------------------------------|--------------------------|--------------------------------|-------------|
| 10 | Cro | First Name ops-either growing of | | Last Name | | |
| 48. | _ | 1 | or narvested | | | |
| | | _ | | | | |
| | ш | Yes. Describe | | | | |
| | • | | | | · | |
| 49. | Far | rm and fishing equip | ment, implements, machinery, fixt | ures, and tools of trade | • | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| | | L | | | | |
| 50. | Far | rm and fishing supp | lies, chemicals, and feed | | | |
| | ~ | No | | | | |
| | | Yes. Describe | | | | |
| | | | | | | |
| 51. | Anv | v farm- and commer | cial fishing-related property you di | d not already list | | |
| | ✓ | No | 3 | | | |
| | Ħ | Yes. Describe | | | | |
| | _ | | | | | |
| | • | | | | ī | |
| | | | of your entries from Part 6, includ | | | |
| IOI P | art O | . write that number | lere | | | |
| | | | | | | |
| Part | 7. | Doscribo All Br | operty You Own or Have an I | ntorest in That You | Did Not List Abovo | |
| | | | perty four Own of Trave and | | Did Not List Above | |
| 00. | | | , country club membership | , | | |
| | ✓ | No | | | | 1 |
| | | Yes. Give specific | | | | |
| | | information | | | | |
| | | | | | | |
| | | | | | _ | |
| 54. A | dd ti | he dollar value of all | of your entries from Part 7. Write t | hat number here | | |
| | | | | | | |
| | | | | | | |
| Part | 8: | List the lotals of | of Each Part of this Form | | | |
| 55. F | art ' | 1: Total real estate, I | ine 2 | | | |
| | | | _ | | | |
| | | 2 total vehicles, line | | \$1825.00 | <u> </u> | |
| 57. P | art 3 | 3: Total personal and | I household items, line 15 | \$750.00 | _ | |
| 58. P | art 4 | 1: Total financial ass | ets, line 36 | \$25.00 | <u> </u> | |
| 59. F | Part ! | 5: Total business-re | lated property, line 45 | | <u></u> | |
| 60. F | Part (| 6: Total farm- and fi | shing-related property, line 52 | | | |
| 61. F | Part 1 | 7: Total other prope | rty not listed, line 54 | | _ | |
| 62. 1 | Γotal | personal property. | Add lines 56 through 61 | \$2600.00 | | + \$2600.00 |
| | | | | | Copy personal property total ► | |
| | | | | | | \$2600.00 |
| 63. T | otal | of all property on So | chedule A/B. Add line 55 + line 62 | | | |

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| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Latia First Name | Middle Name | Simmons Last Name | | | |
| Debtor 2 (Spouse, if fili | ing) First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (Otato) | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | t 1: Identify the Property You Cla | im as Exempt | | | | | |
|----------|---|---|---|------------------------------------|--|--|--|
| 1. 2. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | |
| | Brief description: Misc. Household Goods Line from Schedule A/B: 06 | \$350.00 | \$350.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | |
| | Brief description: Used Clothing Line from Schedule A/B: 11 | \$225.00 | \$225.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) | | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every) No Yes. Did you acquire the property covered No Yes | 3 years after that for ca | | | | | |

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Debtor 1 Simmons Case number (if known) Latia Middle Name First Name Last Name Part 2: Additional Page Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$50.00 V description: \$50.00 Misc. Jewelry 100% of fair market value, up to any applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$125.00 **V** description: \$125.00 Misc. Electronics 100% of fair market value, up to any Line from applicable statutory limit 07 Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$25.00 **V** description: \$25.00 Cash on hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 735 ILCS 5/12-1001(c); 735 ILCS Brief \$1,825.00 $\overline{\mathbf{V}}$ description: 5/12-1001(b) \$1,825.00 Honda Accord, 1999 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 03

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| | | | | | _ | | |
|-----------------|------------------|-------------------------------|---|---|--|-----------------------------------|--------------------------|
| Fill in | n this inform | ation to identify your cas | e: | | | | |
| Debt | tor 1 | Latia | | Simmons | | | |
| | | First Name | Middle Name | Last Name | | | |
| Debt | | | | | | | |
| (Spo | use, if filing | First Name | Middle Name | Last Name | | | |
| Unite | ed States Ba | ankruptcy Court for the: | Northern | District of Illinois | | | |
| _ | | | | (State) | | | |
| Case (If kno | e number own) | | | | | | |
| Off | icial F | Form 106D | | | 1 | | Check if this is an |
| Sc | hedu | le D: Credi | tors Who Ha | ve Claims Secui | red by Pro | | 12/15 |
| space | e is needed | | | are filing together, both are equa e entries, and attach it to this form | | | |
| 1. | Do any cre | editors have claims sec | cured by your property? | | | | |
| | ✓ No. Ch | neck this box and submit | this form to the court with yo | our other schedules. You have nothing | else to report on this fo | orm. | |
| | Yes. F | ill in all of the information | below. | | | | |
| Part | 1: List | All Secured Claims | S | | | | |
| 2. | List all sec | cured claims. If a credito | or has more than one secure | ed claim, list the creditor separately | Column A | Column B | Column C |
| | | | editor has a particular claim, alphabetical order accordin | list the other creditors in Part 2. As g to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports | Unsecured portion If any |
| | | | | | | this claim | |

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| Fill in t | his inform | ation to identify your cas | se: | | | | | |
|--------------------------------|--|---|---|---|---|--|--|--|
| Debto | r 1 | Latia | | Simmons | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| Debto | | First Name | Middle Name | Last Name | | | | |
| (Opout | 50, ii iiiiig | / I list Name | Middle Name | Last Name | | | | |
| United | States Ba | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| Case | number | | | (State) | | | | |
| (If know | vn) | | | | | _ | | |
| Offic | cial F | orm 106E/F | | | | Ch | eck if this is ar | n amended filing |
| Sch | hadu | IA F/F: Cra | ditors Who | Have I Inco | cured Claims | | | |
| <u> </u> | icuu | ile L/i . Cie | CUITOI S VVIIO | Tiave Offise | cureu Ciaiiiis | | | 12/15 |
| party to 106A/B that are | o any exe) and on e listed in in the bo | cutory contracts or un Schedule G: Executor Schedule D: Creditor | expired leases that could by Contracts and Unexpire on Who Hold Claims Secu | result in a claim. Also lised Leases (Official Form red by Property. If more | s and Part 2 for creditors with tt executory contracts on <i>Sch</i> 106G). Do not include any cre space is needed, copy the Po f any additional pages, write | edule A/B editors witl art you nee | : Property (On partially second it is partially second it is out, read, fill it out, read it is not the content of the content is not the content of the con | fficial Form cured claims number the |
| Part 1 | List A | All of Your PRIORI | TY Unsecured Claims | S | | | | |
| 1. C | o any cre | editors have priority ur | nsecured claims against y | ou? | | | | |
| <u> </u> | No. G | o to Part 2. | | | | | | |
| | Yes. | | | | | | | |
| li: | sted, iden nuch as po continuatio | tify what type of claim it is ossible, list the claims in on Page of Part 1. If mor | s. If a claim has both priority: | and nonpriority amounts, light to the creditor's name. If your claim, list the other. | | n priority and | d nonpriority ar | mounts. As |
| | | | | | | Total claim | Priority amount | Nonpriority amount |

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| Debto | | mons Case number (if known) | |
|----------|--|---|------------------|
| | First Name Middle Name Last | Name | |
| Part 2 | List All of Your NONPRIORITY Unsecured Claims | i | |
| 3. I | Do any creditors have nonpriority unsecured claims against you | ? | |
| 1 | No. You have nothing to report in this part. Submit this form to the | | |
| i | ✓ Yes. | · | |
| | | order of the creditor who holds each claim. If a creditor has more t | han one priority |
| | | claim listed, identify what type of claim it is. Do not list claims already in | |
| | | s in Part 3.lf you have more than four priority unsecured claims fill out t | |
| F | Page of Part 2. | | |
| | | | Total claim |
| 4.1 | CAPITAL ONE | Last 4 digits of account number | \$2,000.00 |
| | Nonpriority Creditor's Name | | |
| | 11013 W BROAD ST Number Street | When was the debt incurred?n/a | |
| | Trained Circuit | As of the date you file, the claim is: Check all that apply. | |
| | OLEM ALLEN | Contingent | |
| | GLEN ALLEN Virginia 23060 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | ~ | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this plaim valeton to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | ✓ Other. Specify Credit Card Debt | |
| | | | |
| | Yes | | |
| 4.2 | City of Chicago Parking Nonpriority Creditor's Name | Last 4 digits of account number | \$3,000.00 |
| | 121 N. LaSalle St # 107A | When was the debt incurred? n/a | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Chicago Illinois 60602 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts | |
| | ✓ No | ✓ Other. Specify Parking Tickets | |
| | Yes | | |
| 4.3 | CREDIT MANAGEMENT LP | | \$297.00 |
| <u> </u> | Nonpriority Creditor's Name | Last 4 digits of account number1764 | Ψ291.00 |
| | 4200 INTERNATIONAL PKWY Number Street | When was the debt incurred? 6/1/2016 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | CARROLLTON Texas 75007 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | 님 | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | 001 Collection; Collecting for | |
| | | ORIGINAL CREDITOR: COMCAST CENTRAL | |
| | Yes | Other. Specify WAREHOUSE | |

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Debtor 1 Latia Simmons Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim ENHANCED RECOVERY** 4.4 \$679.00 Last 4 digits of account number _ Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **✓ ✓** No ORIGINAL CREDITOR: Other. Specify **TMOBILE** Yes **ENHANCED RECOVERY** 4.5 \$295.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 11/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Florida Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? 001 Collection; Collecting for |√| **V** No ORIGINAL CREDITOR: Other. Specify **TMOBILE** Yes **ENHANCED RECOVERY** 4.6 \$250.00 Last 4 digits of account number _ Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? 001 Collection; Collecting for **✓** \checkmark No

Yes

Other. Specify

ORIGINAL CREDITOR:

TMOBILE

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Debtor 1 Latia Simmons Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** FEDERAL LOAN SERVICE 4.7 \$2,192.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 60610 When was the debt incurred? 10/1/2010 Number As of the date you file, the claim is: Check all that apply. Contingent 17106 Harrisburg Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify **✓** No Yes FEDERAL LOAN SERVICE 4.8 \$1,462.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 60610 When was the debt incurred? 10/1/2010 Number As of the date you file, the claim is: Check all that apply. Contingent Pennsylvania 17106 Harrisburg Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **V** No Yes FIRST PREMIER BANK 4.9 \$431.00 Last 4 digits of account number Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? 6/1/2016 As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent Saint Cloud Minnesota 56302 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard Other. Specify __ **✓** No

Yes

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Debtor 1 Latia Simmons Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 HARRIS \$311.00 Last 4 digits of account number Nonpriority Creditor's Name 111 WEST JACKSON B SUITE 400 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** 60604 Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? **✓** Collection; Collecting for **✓** No ORIGINAL CREDITOR: 10 Other. Specify PEOPLES GAS Yes 4.11 Medical Payment Data \$403.00 Last 4 digits of account number 4730 Nonpriority Creditor's Name 2525 N. Shadeland When was the debt incurred? 2/1/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent 46219 Indianapolis Indiana Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only |~| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for |~| **✓** No ORIGINAL CREDITOR: Other. Specify MEDICAL PAYMENT DATA Yes 4.12 Medical Payment Data \$119.00 Last 4 digits of account number _ Nonpriority Creditor's Name 2525 N. Shadeland When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Indianapolis Indiana 46219 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for ORIGINAL CREDITOR: **✓ ✓** No

Yes

Other. Specify

MEDICAL PAYMENT DATA

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| Debtor | 1 Latia | Simmons | Case number (if known) |
|---------|---|-----------------------------|---|
| | First Name Middle Name | Last Name | |
| Part 2: | Your NONPRIORITY Unsecured Claims - | Continuation Page | |
| | After listing any entries on this page, number them | beginning with 4.5, followe | ed by 4.6, and so forth. Total claim |
| 4.13 | US Cellular | Last 4 digits o | of account number \$1,000.00 |
| | Nonpriority Creditor's Name Dept 0205 | When was the | e debt incurred?n/a |
| | Number Street | As of the date | you file, the claim is: Check all that apply. |
| | Palatine Illinois 60055 | Contingent | |
| | City State Zip Code | Unliquidate | ed |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | <u> </u> | Type of NONP | RIORITY unsecured claim: |
| | Debtor 2 only | Student loa | ns |
| | Debtor 1 and Debtor 2 only | = | |
| | At least one of the debtors and another | | s arising out of a separation agreement or divorce I not report as priority claims |
| | Check if this claim relates to a community debt | Debts to pe | ension or profit-sharing plans, and other similar |
| | Is the claim subject to offset? | Other. Spe | cify Cell Phone Bills |
| | ✓ No | Other. Spec | ony Och i Hone Bills |
| | ☐ Yes | | |

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Simmons Debtor 1 Latia Case number (if known) First Name Middle Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$3,654.00 **Total claims** 6f. Student loans 6f. from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$8,785.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$12,439.00

6 j.

6j. Total. Add lines 6f through 6i.

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| Fill in this inform | nation to identify your cas | e: | | | |
|------------------------|--|-------------------------------|--------------------------|---|--|
| Debtor 1 | Latia | | Simmons | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing |) First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois | | |
| | | | (State) | | |
| Case number (If known) | | | | | |
| | Form 106G le <mark>G: Execut</mark> | | s and Unexp | Check if this is amended filing | |
| | d, copy the additional p | | | ooth are equally responsible for supplying correct information. If moit to this page. On the top of any additional pages, write your name | |
| 1. Do you h | ave any executory | contracts or unexpir | ed leases? | | |
| ✓ No. Che | eck this box and file this fo | rm with the court with your o | ther schedules. You have | ave nothing else to report on this form. | |
| Yes. Fill | in all of the information be | elow even if the contracts or | leases are listed on Sch | chedule A/B: Property (Official Form 106A/B). | |
| | | | | se. Then state what each contract or lease is for (for example, rent, r more examples of executory contracts and unexpired leases. | |

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | | 3 | |
|------------------------|-----------------------------|----------------------------------|----------------------------------|---|
| Fill in this info | rmation to identify your ca | se: | | |
| Debtor 1 | Latia | | Simmons | |
| | First Name | Middle Name | Last Name | _ |
| Debtor 2 | | | | |
| (Spouse, if fili | ng) First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | |
| 0 | | | (State) | |
| Case number (If known) | · - | | | _ |
| Official | Form 106H | | | Check if this is ar amended filing |
| | le H: Your C | odebtors | | 12/15 |
| ✓ No Yes | nave any codebtors? (If y | , | not list either spouse as a code | |
| Idaho, Lo | • • | kico, Puerto Rico, Texas, Wa | | munity property states and territories include Arizona, California, |
| = | . Did your spouse, former s | spouse, or legal equivalent liv | ve with you at the time? | |
| | No | | | |
| | Yes. In which community | state or territory did you live? | ? Fill in th | ne name and current address of that person. |
| | Name of your spouse, | former spouse, or legal equiv | valent | - |
| | Number Street | | | - |
| | City | State | Zip Code | - |
| again as | a codebtor only if that p | erson is a guarantor or co | osigner. Make sure you have | r spouse is filing with you. List the person shown in line 2 listed the creditor on Schedule D (Official Form 106D), D, Schedule E/F, or Schedule G to fill out Column 2. |

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| Fill in this information to ident | ify your case: | | | | | | |
|--|---|---|--------------------------|----------------------------|--|------------|---------|
| | ny your odoo. | Cimmono | | | | | |
| Debtor 1 <u>Latia</u> First Name | Middle Name | Simmons Last Name | 9 | _ | | | |
| Debtor 2 | | | | | Check if this is: | | |
| (Spouse, if filing) First Name | Middle Name | Last Name | Э | | An amended filing | | |
| United States Bankruptcy Court for the | : Northern | District of Illinoi | | _ | A supplement show expenses as of the | | |
| Case number (If known) | | (State | -) | _ | MM / DD / YYYY | | |
| Official Form 106I | | | | | WWW, DD, TTTT | | |
| Schedule I: Your In | come | | | | | | 12/ |
| equally responsible for supp with you, include information nclude information about you additional pages, write your of Part 1: Describe Employm | n about your spouse. I ur spouse. If more spa name and case numbe | If you are sepa ace is needed, | arated and attach a s | d your spou separate sh | se is not filing wi eet to this form. C | th you, do | o not |
| Fill in your employment | | Debtor 1 | | | Debtor 2 | | |
| information. | Formular was and adaptive | | | | | | |
| If you have more than one job, | Employment status | ✓ Employed☐ Not Employed | | ☐ Employed ☐ Not Employed | | | |
| attach a separate page with information about additiona | O | | | | | | |
| employers. | Employer's name | Skytech Enter | orises, LTD | | | | |
| Include part time, seasonal or self-employed work. | ' Employer's address | 2600 South Michigan Avenue # 104 Number Street | | ie # 104 | Number Street | | |
| Occupation may include student | | | | | | | |
| or homemaker, if it applies. | | Chicago City | Illinois State | 60616 Zip Code | City | State Z | ip Code |
| | How long employed there? | | | | | | |
| Estimate monthly income as of the you are separated. If you or your non-filing spouse have reattach a separate sheet to this form. | e date you file this form. If y | - | for all employe | | | | |
| List monthly gross wages, sal deductions.) If not paid monthly, | | | | \$2,314.98 | | | |
| 3. Estimate and list monthly over | ertime pay. | 3. | | + \$0.00 | | | |

\$2,314.98

4. Calculate gross income. Add line 2 + line 3.

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| Deb | tor 1 Latia First Name Middle Name | Simmons Last Name | Case number (| (if known) | |
|-----------------------|---|-----------------------------|---------------------------|-----------------------------------|-------------------------|
| | First Name Middle Name | Last Name | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| С | opy line 4 here | → 4 | \$2,314.98 | | |
| 5. Li | st all payroll deductions: | | | | |
| 5 | a. Tax, Medicare, and Social Security deductions | 5a | \$443.56 | | |
| 5 | b. Mandatory contributions for retirement plans | 5b | \$0.00 | | |
| 5 | c. Voluntary contributions for retirement plans | 5c | \$0.00 | | |
| 5 | d. Required repayments of retirement fund loans | 5d | \$0.00 | | |
| 5 | e. Insurance | 5e. | \$0.00 | | |
| 5 | f. Domestic support obligations | 5f | \$0.00 | | |
| 5 | g. Union dues | 5g | \$0.00 | | |
| 5 | h. Other deductions. Specify: | 5h. + | \$0.00 + | | |
| 6. A 6 +5h. | dd the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + | -5f + 5g 6 | \$443.5 <u>6</u> | | |
| 7. C | alculate total monthly take-home pay. Subtract line 6 from line | e 4. 7 | \$1,871.42 | | |
| 8. Li | st all other income regularly received: | | | | |
| 8 | a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing grant | ross | | | |
| | receipts, ordinary and necessary business expenses, and the monthly net income. | | \$0.00 | | |
| 8 | b. Interest and dividends | 8b | \$0.00 | | |
| 8 | c. Family support payments that you, a non-filing spouse, dependent regularly receive | | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c | \$0.00 | | |
| | d. Unemployment compensation | 8d | \$0.00 | - | |
| | e. Social Security | 8e | \$0.00 | | |
| 8 | f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-ca assistance that you receive, such as food stamps (benefits und the Supplemental Nutrition Assistance Program) or housing subsidies | | | | |
| | Specify: | 8f | \$0.00 | | |
| | g. Pension or retirement income | 8g | \$0.00 | | |
| 8 | h. Other monthly income. Specify: | 8h. + | \$0.00 + | | |
| 9. A | dd all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g | + 8h. 9 | \$0.00 | | |
| | calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing s | 10 | \$1,871.42 + | = | \$1,871.42 |
| lı r | State all other regular contributions to the expenses that your clude contributions from an unmarried partner, members of your elatives. Do not include any amounts already included in lines 2-10 or amounts. | household, your deper | • | | |
| 5 | Specify: | | | 1 | 1. + \$0.00 |
| | Add the amount in the last column of line 10 to the amount Vrite that amount on the Summary of Schedules and Statistical St | | | | 2. \$1,871.42 |
| V | vino และละกอนาเ on แอ ounimary or ounedues and statistical st | anınay or oerları Eldi. | नावच्च वाच INGIALGU Dala, | ιι ιι αμμιισο | Combined monthly income |
| 13. | Do you expect an increase or decrease within the year after No. | you file this form? | | | ey income |
| [| Yes. Explain: Debtor received LINK for the last six month | s but it is set to end in t | he near future. | | |

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| Fill in this inform | nation to identify your c | ase. | | | | |
|---------------------------------|---|--|---|------------------------------------|-------------------------------|--------------|
| FIII III UIIS II IIOII | nation to identity your c | dSe. | | | | |
| Debtor 1 | Latia | N.C. I. II. a. N.L. a. a. | Simmons | | | |
| Dobtor 2 | First Name | Middle Name | Last Name | 01 1 1 1 1 1 1 | | |
| Debtor 2 (Spouse, if filing | First Name | Middle Name | Last Name | Check if this is: | | |
| | | Nicotheres | District of IIII and a | An amended filin | • | |
| United States E | ankruptcy Court for the | : Northern | District of Illinois (State) | A supplement sh expenses as of the | | |
| (If known) | | | | MM / DD / YYYY | | |
| Ott: -; - | T 400 l | | <u>'</u> | IVIIVI / DD / TTT | | |
| Omiciai | Form 106J | | | | | |
| Schedul | e J: Your E | xpenses | | | | 12/15 |
| information. If (if known). Ans | | d, attach another sheet to this | e filing together, both are equally form. On the top of any additiona | | | umber |
| 1. Is this a joir | nt case? | | | | | |
| ✓ No. Go | to line 2 | | | | | |
| Yes. Do | oes Debtor 2 live in a | separate household? | | | | |
| | No | | | | | |
| | Yes. Debtor 2 must | file Official Forms 106J-2, Expen | ses for Separate Household of Debto | r 2. | | |
| 2. Do you hav dependents? | е | No | | | | |
| Do not list D Debtor 2. | | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 Child | Dependent's age 4 years | Does depen with you? No. Yes. | dent live |
| | your \Box | No Yes | | | _ | |
| Part 2: Esti | nate Your Ongoin | g Monthly Expenses | | | | |
| _ | of a date after the ban | | you are using this form as a supp plemental Schedule J, check the | • | • | |
| | • | -cash government assistance I it on <i>Schedule I: Your Incom</i> e | - | | Yo | our expenses |
| | or home ownership ear the ground or lot. 4. | xpenses for your residence. In | clude first mortgage payments and | | 4. | \$352.00 |
| If not incl | uded in line 4: | | | | | |
| 4a. Real es | state taxes | | | | 4a | \$0.00 |
| 4b. Proper | ty, homeowner's, or ren | ter's insurance | | | 4b. | \$0.00 |
| 4c. Home i | maintenance, repair, and | l upkeep expenses | | | 4c. | \$0.00 |
| 4d. Homeo | wner's association or c | ondominium dues | | | 4d. | \$0.00 |

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Simmons_ Debtor 1 Latia Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$120.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$250.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$399.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$150.00 10. Personal care products and services \$150.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$200.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$75.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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| Debtor 1 | | | Simmons | Case number (if known) | | |
|-------------------|------------------------|--|---------------------------------|------------------------|-----|------------|
| | First Name | Middle Name | Last Name | | | |
| 21.Other | . Specify: | | | | 21 | \$0.00 |
| | | | | | | |
| 22. Calcu | ılate your monthly e | expenses. | | | | \$1,696.00 |
| 22a. <i>A</i> | Add lines 4 through 2° | 1. | | | | \$0.00 |
| 22b. C | Copy line 22 (monthly | expenses for Debtor 2), if any, fro | om Official Form 106J-2 | | | \$1,696.00 |
| 22c. A | add line 22a and 22b. | The result is your monthly expens | ses. | | 22. | |
| 23.Calcu | late your monthly r | net income. | | | | |
| 23a. C | Copy line 12 (your cor | mbined monthly income) from Sch | nedule I. | | 23a | \$1,871.42 |
| 23b. C | Copy your monthly exp | penses from line 22 above. | | | 23b | \$1,696.00 |
| 23c. S | Subtract your monthly | expenses from your monthly inco | me. | | | \$175.42 |
| | The result is your mo | nthly net income. | | | 23c | |
| 24. Do y o | ou expect an increa | se or decrease in your expens | es within the year after you | file this form? | | |
| For e | example. do vou expe | ect to finish paying for your car loan | n within the vear or do vou ext | pect your | | |
| | | ease or decrease because of a n | | | | |
| ✓ 1 | No | | | | | |
| | /es | | | | | |
| | Explain here | 5 ' | | | | |
| | Explain Hore | ·· | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Fill in this infor | mation to identify your cas | e: | | |
|------------------------|-----------------------------|-------------|----------------------|---|
| Debtor 1 | Latia | | Simmons | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing | ^{ng)} First Name | Middle Name | Last Name | _ |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | |
| Case number (If known) | | | (State) | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t1: Sign Below | |
|-----|---|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? |
| | ☑ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary at that they are true and correct. | nd schedules filed with this declaration and |
| 4.0 | • | 4. |
| X | /s/ Latia Simmons | * |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 10/25/2016 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct informatio space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer equestion. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married No No Yes. List all of the places you lived anywhere other than where you live now? Debtor 1: Dates Debtor 1 lived there Same as Debtor 2: There Same as Debtor 1 Same as Decomplete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for supplying correct information and case number (if known). Answer equality responsible for | Debtor 1 | | dentify your ca | Se. | | | | | |
|--|------------|------------------------------------|--------------------|--------------------------|--|--|------------------|---------------------|---|
| Debtor 2. (Spouse, if filling) First Name | | | | | | | , | | |
| Spouse, if filing) First Name | | First Na | ime | Middle Na | ame Last Nan | ne | | | |
| United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Difficial Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Se as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct Informatio pace is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer equestion. Parts: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? Poebtor 1: Dates Debtor 1 lived there Debtor 2: there Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Chicago Illinois 60637 City State Zip Code Number Street From Number Street From Same as Debtor 1 Number Street From Same as Debtor 1 Number Street From Same as Debtor 1 Number Street From Same as Debtor 1 To Same as Debtor 1 | | if filing) Firet No | ımo | Middle No | umo Lact Nam | 20 | | | |
| Case number ((If known)) Check amend Ch | (орошоо, | 9/ FIISLING | iiie | Wildale Na | ine Lastinan | i c | | | |
| Case number (If known) Difficial Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy e as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct informatio pace is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer e uestion. Part I: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married Not married No married During the last 3 years, have you lived anywhere other than where you live now? Yes, List all of the places you lived in the last 3 years. Do not include where you live now. Dates Debtor 1: | United Sta | ates Bankruptcy | Court for the: | Northern | | | | | |
| Check amend | | nber | | | • | , | | | |
| Estatement of Financial Affairs for Individuals Filing for Bankruptcy The as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information pace is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer eleustion. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married Not married No married Not married No weight No weight Not married Not married | Offici | al Form | 107 | | | | | | Check if this is amended filing |
| pace is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer equestion. Part 1: Give Details About Your Marital Status and Where You Lived Before | | | | ial Affairs | for Individua | als Filin | g for Ba | ankruptcy | 12 |
| Same as Debtor 1 Same as Debtor 2 Same as Debtor 1 Same as Debtor 2 Same as Debtor 1 Same as Debtor 2 Same as Debtor 3 Same as Debtor 4 Same as Debtor 5 Same as Debtor 6 Same as Debtor 1 Same as Debtor 6 Same as Debtor 7 Same as Debtor 9 Same as Debtor 1 Same as Deb | | | | | | | | | |
| 1. What is your current marital status? | • | ccaca, attaon | a separate si | | the top of any additions | ii pages, wille | your name and | a case namber (ii i | alowij. Allower every |
| Married Not married | | o: | A1 4 W | | 114/1 3/ 11 | | | | |
| Married ✓ Not married ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live | art 1: | Give Details | About You | ir Maritai Status | and Where You Liv | ed Before | | | |
| Not married | 1. WI | nat is your cur | rent marital s | tatus? | | | | | |
| Not married | | Morriad | | | | | | | |
| During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 lived there Same as Debtor 2: there Same as Debtor 1 Same as Debtor 1 Chicago Illinois 60637 City State Zip Code From | F | | | | | | | | |
| No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 lived there Debtor 2: Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 To Chicago Illinois 60637 City State Zip Code Number Street From Same as Debtor 1 Same as Debtor 1 Same as Debtor 2: To Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Number Street From Same as Debtor 1 Number Street Number Street From Same as Debtor 1 | <u> </u> | Not mameu | | | | | | | |
| Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: | 2. Du | ring the last 3 | years, have y | ou lived anywhere o | ther than where you live | now? | | | |
| Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: | | l No | | | | | | | |
| Dates Debtor 1 lived there Dates Debtor 2 there Same as Debtor 2 To Same as Debtor 1 Same as Debtor 2 To Same as Debtor 1 Same as Debtor 2 To Same as Debtor 1 Same as Debtor 2 To Same as Debtor 1 Same as Debtor 2 To Same as Debtor 1 Same as Debtor 2 To Same as Debtor 1 Same as Debtor 2 To Same as Debtor 1 Number Street From Same as Debtor 1 Number Street From Same as Debtor 1 Number Street To Same as Debtor 1 | _ | | | | | | | | |
| there Same as Debtor 1 Same as De Same as Debtor 1 Same as De Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Same as Debtor 2 Same as Debtor 3 Same as Debtor 3 Same as Debtor 4 Same as Debtor 4 Same as Debtor 5 Same as Debtor 6 Same as Debtor 7 Same as Debtor 6 Same as Debtor 7 Same as Debtor 7 Same as Debtor 6 Same as Debtor 7 Same as Debtor 8 Same as Debtor 9 Same 9 Sa | 1./ | | the places vol | lived in the last 3 year | rs. Do not include where v | ou live now | | | |
| there Same as Debtor 1 Same as De Same as Debtor 1 Same as De Same as Debtor 1 Same as Debtor 2 Same as Debtor 3 Same as Debtor 4 Same as Debtor 1 Same as Debtor 4 Same as Debtor 5 Same as Debtor 6 Same as Debtor 7 Same as Debtor 6 Same as Debtor 7 Same as Debtor 7 Same as Debtor 7 Same as Debtor 7 Same as Debtor 8 Same as Debtor 9 Same 9 Sa | ✓ | • | the places you | lived in the last 3 year | rs. Do not include where y | ou live now. | | | |
| Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Same as Debtor 2 Same as Debtor 3 Same as Debtor 3 Same as Debtor 4 Same as Debtor 5 Same as Debtor 6 Same as Debtor 1 Same as Debtor 6 Same as Debtor 7 Same as Debtor 6 Same as Debtor 7 Same as Debtor 7 Same as Debtor 6 Same as Debtor 7 Same as Debtor 7 Same as Debtor 7 Same as Debtor 8 Same as Debtor 9 Same 9 | ✓ | | the places you | lived in the last 3 yea | | | | | |
| 71 56th Number Street From | <u>~</u> | | the places you | lived in the last 3 yea | Dates Debtor 1 lived | | | | Dates Debtor 2 lived |
| Number Street To Chicago Illinois 60637 City State Zip Code City State Zip Code Same as Debtor 1 From | <u>✓</u> | | the places you | lived in the last 3 yea | Dates Debtor 1 lived | | | | |
| Number Street To Chicago Illinois 60637 City State Zip Code City State Zip Code Same as Debtor 1 From | ✓ | | the places you | lived in the last 3 yea | Dates Debtor 1 lived | Debtor 2: | s Debtor 1 | | |
| Chicago Illinois 60637 City State Zip Code Same as Debtor 1 Number Street To City State Zip Code Number Street From Number Street To | ✓ | Debtor 1: | the places you | lived in the last 3 year | Dates Debtor 1 lived | Debtor 2: | s Debtor 1 | | there |
| City State Zip Code Same as Debtor 1 Same as Debtor 1 Number Street To To | ⊻ | Debtor 1: 71 56th | | lived in the last 3 year | Dates Debtor 1 lived there | Debtor 2: | | | there Same as Debtor 1 |
| City State Zip Code Same as Debtor 1 Same as Debtor 1 Number Street To To | ⊻ | Debtor 1: 71 56th | | lived in the last 3 yea | Dates Debtor 1 lived there | Debtor 2: | | | there Same as Debtor 1 From |
| Number Street From Number Street To | <u>K</u> | Debtor 1: 71 56th Number Street | et | | Dates Debtor 1 lived there | Debtor 2: | | | there Same as Debtor 1 From |
| Number Street From Number Street From To To To | <u>⊾</u> | Debtor 1: 71 56th Number Street | et Illinois | 60637 | Dates Debtor 1 lived there | Debtor 2: Same a Number Stre | eet | Zip Code | there Same as Debtor 1 From |
| To | <u> </u> | Debtor 1: 71 56th Number Street | et Illinois | 60637 | Dates Debtor 1 lived there | Debtor 2: Same a Number Street | eet State | Zip Code | there Same as Debtor 1 From To |
| To | <u>K</u> | Debtor 1: 71 56th Number Street | et Illinois | 60637 | Dates Debtor 1 lived there | Debtor 2: Same a Number Street | eet State | Zip Code | there Same as Debtor 1 From |
| | ¥ | 71 56th Number Street Chicago City | et Illinois State | 60637 | Dates Debtor 1 lived there From To | Debtor 2: Same a Number Stre City Same a | State S Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| City State Zip Code City State Zip Code | <u>~</u> | 71 56th Number Street Chicago City | et Illinois State | 60637 | Dates Debtor 1 lived there From To From | Debtor 2: Same a Number Stre City Same a | State S Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From From Tro |
| City State Zip Code City State Zip Code | ¥ | 71 56th Number Street Chicago City | et Illinois State | 60637 | Dates Debtor 1 lived there From To From | Debtor 2: Same a Number Stre City Same a | State S Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From From Tro |
| | ¥ | 71 56th Number Stree Chicago City | et Illinois State | 60637 Zip Code | Dates Debtor 1 lived there From To From | Debtor 2: Same a Number Stre City Same a | State s Debtor 1 | | there Same as Debtor 1 From To Same as Debtor 1 From From Tro |
| 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property state | ¥ | 71 56th Number Stree Chicago City | et Illinois State | 60637 Zip Code | Dates Debtor 1 lived there From To From | Debtor 2: Same a Number Stre City Same a | State s Debtor 1 | | there Same as Debtor 1 From To Same as Debtor 1 From From Tro |

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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| Deb | tor 1 | | | | e number (if known) | |
|--------|-----------------------|---|---|--|--|--|
| | | First Name Middle | | Name | | |
| Part | 2: | Explain the Sources of Your I | ncome | | | |
| | Fill | I you have any income from employm in the total amount of income you receive vities. If you are filing a joint case and you No Yes. Fill in the details. | ed from all jobs and all bus | inesses, including part-time | | ears? |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | rom January 1 of current year until he date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$5500.00 | Wages, commissions, bonuses, tips Operating a business | |
| | | For last calendar year: January 1 to December 31, 2015) YYYY | Wages, commissions, bonuses, tips Operating a business | \$15000.00 | Wages, commissions, bonuses, tips Operating a business | |
| | | For the calendar year before that: January 1 to December 31, 2014) YYYY | Wages, commissions, bonuses, tips Operating a business | \$15000.00 | Wages, commissions, bonuses, tips Operating a business | |
| ! ! | Inclu bene case | you receive any other income during ude income regardless of whether that incefit payments; pensions; rental income; in and you have income that you received each source and the gross income from No Yes. Fill in the details. | come is taxable. Examples terest; dividends; money o together, list it only once ur | of other income are alimony; collected from lawsuits; royaltinder Debtor 1. | ies; and gambling and lottery wini | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions an exclusions) | Describe below. | Gross income from each source (before deductions and exclusions) |
| | | From January 1 of current year until the date you filed for bankruptcy: | Est. LINK YTD | \$2,000.00 | | |
| | | For last calendar year: (January 1 to December 31, 2015) YYYY | | | | |
| | | For the calendar year before that: (January 1 to December 31, 2014) YYYYY | | | | |
| | | | | | | |

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| | _atia First Name | | Middle Name | Simmons Last Name | Case num | ber (if known) | |
|-------------|---------------------|------------------|-----------------------|---|---|---------------------------------|------------------------|
| | | Daymont | | efore You Filed for | Bankruptov | | |
| L | ist Certain | raymem | is fou Made b | elore fou Filed for | Бапкгирісу | | |
| e ei | ther Debtor 1 | 's or Debto | r 2's debts prima | rily consumer debts? | | | |
| ٦ N | o. Neither De | ebtor 1 nor | Debtor 2 has prin | narily consumer debts. | Consumer debts are defined | l in 11 U.S.C. § 101(8) as "inc | urred by an individual |
| | | | , family, or househo | | | S (, | , |
| | During the | 90 days befo | ore you filed for ban | kruptcy, did you pay any cr | editor a total of \$6,425* or m | ore? | |
| | □ No. G | o to line 7. | | | | | |
| | | | ach creditor to whom | n you paid a total of \$6.425 | * or more in one or more pa | ments and the | |
| | 1 | total amount | you paid that credi | tor. Do not include paymer | nts for domestic support obliques an attorney for this bankru | gations, such as | |
| | * Subject to | adjustment | on 4/01/19 and eve | ery 3 years after that for cas | ses filed on or after the date | of adjustment. | |
| 7 Y4 | - | • | | marily consumer debts. | | • | |
| ٠, ٦ | | | _ | - | adition a total of \$000 | .0 | |
| | _ | | ore you filed for ban | ıkruptcy, ala you pay any cr | editor a total of \$600 or more |) (| |
| | | o to line 7. | | | | | |
| | Yes. | List below ea | ach creditor to whom | n you paid a total of \$600 o | r more and the total amount | you paid | |
| | | | | yments for domestic suppo yments to an attorney for th | ort obligations, such as child | support and | |
| | • | allitionly. Also | , do not include pa | yments to arrationicy for the | is barikraptcy case. | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment |
| _ | | | | | | | for Mortgage |
| С | reditor's Nam | e | | | | | Car |
| N | umber Street | | | | | | Credit card |
| _ | | | | | | | Loan repayme |
| _ | ** | 01-1- | 7. 0. 1. | | | | Suppliers or |
| C | ity | State | Zip Code | | | | vendors Other |
| _ | | | | | | | |
| С | reditor's Nam | e | | | | | ☐ Mortgage ☐ Car |
| N | umber Street | | | | | | Credit card |
| _ | | | | | | | Loan repayme |
| | | | | | | | Suppliers or |
| C | ity | State | Zip Code | | | | vendors |
| | | | | | | | Other |
| C | reditor's Nam | ie | | | | | Mortgage |
| _ | | | | | | | Car |
| Ν | umber Street | | | | | | Credit card |
| | | | | | | | Loan repayme |
| _ | | | | | | | |
| <u> </u> | ity | State | Zip Code | | | | Suppliers or vendors |

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| Debtor 1 | | | | | nmons | Case number (| if known) |
|-----------------------|--|--|--|---------------------------------------|---|--|--|
| | First Name | | Middle Name | Last | t Name | | |
| Insid corp ager | ders include your rel orations of which you nt, including one for n as child support ar | latives; any g ou are an offi a business y | general partners; icer, director, per | relatives of any grown in control, or | general partners; par owner of 20% or mo | tnerships of which y ore of their voting se | ho was an insider? You are a general partner; Curities; and any managing Omestic support obligations, |
| ✓ | No | | | | | | |
| Ш | Yes. List all payme | nts to an insi | der. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City S | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City 5 | State | Zip Code | | | | |
| insid | | | | | payments or trans | fer any property o | n account of a debt that benefited an |
| | No Yes. List all paymer | nts that bene | fited an insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | | | | | | | Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City S | State | Zip Code | | | | |
| _ | | | | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City S | State | Zip Code | | | | |

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| tor 1 | Latia | | Simmons | (| Case number (if | known) | |
|----------|--|----------------|----------------------------------|-----------|-----------------|----------|-----------------------|
| | First Name | Middle Name | Last Name | | | | |
| 4: | Identify Legal Actions | , Repossession | s, and Foreclosure | s | | | |
| ist a | nin 1 year before you filed fo all such matters, including pers ract disputes. | | | | | | |
| ✓ | No Yes. Fill in the details. | | | | | | |
| _ | res. I iii iii the details. | Nat | ure of the case | Court or | agency | | Status of the case |
| | Case title | | | | | | Pending |
| | | | | Court Nar | ne | | On appeal |
| | Case number | | | NumberSt | reet | | Concluded |
| | - | | | | | | |
| | | | | City | State | Zip Code | |
| | Case title | | | Court Nar | | | Pending |
| | Case number | | | | | | On appeal Concluded |
| | | | | NumberSt | reet | | Concluded |
| | | | | City | State | Zip Code | |
| | | | | Oity | Oldio | Zip Oode | |
| | Yes. Fill in the information be | elow. | Describe the prop | erty | | Date | Value of the property |
| | Cua dita da Nassa | | - | | | | |
| | Creditor's Name | | Explain what happ | ened | | | |
| | Number Street | | - | | | | |
| | | | Property was re | • | | | |
| | | | Property was for Property was ga | | | | |
| | City State | Zip Code | Property was at | | or levied. | | |
| | | | Describe the prop | erty | | Date | Value of the property |
| | Creditor's Name | | - | | | | |
| | 2 | | Explain what happ | ened | | | |
| | Number Street | | - | | | | |
| | | | Property was re | | | | |
| | | | Property was fo | | | | |
| | City State | Zip Code | Property was at | | or levied. | | |

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| Deb | tor 1 | Latia First Name Middle Name | Simmons Last Name | Case number (if known) | |
|-------------|----------|---|---------------------------------|--|----------------------------|
| 11. | | hin 90 days before you filed for bankruptcy, die | d any creditor, including a bai | nk or financial institution, set off any a | Imounts from your |
| | | No Yes. Fill in the details. | u owed a debt? | | |
| | | res. i iii iii ule detaiis. | Describe the action the | creditor took Date action was taken | |
| | | Creditor's Name | _ | | |
| | | Number Street | Last 4 digits of account nu | mber: XXXX- | |
| | | City State Zip Code | _ | | |
| 12. | | hin 1 year before you filed for bankruptcy, was ointed receiver, a custodian, or another officia | | ossession of an assignee for the benef | fit of creditors, a court- |
| | ✓ | No Yes | | | |
| Part | | List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy, di | d you give any gifts with a tot | al value of more than \$600 per person | ? |
| 10. | <u>~</u> | | a you give any give with a tot | ar value of more than \$000 per person | |
| | | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | |
| | | Person to Whom You Gave the Gift | _ | | |
| | | Number Street | - | | |
| | | City State Zip Code Person's relationship to you | | | |
| | | Person to Whom You Gave the Gift | _ | | |
| | | Number Street | - | | |
| | | City State Zip Code Person's relationship to you | _ | | |

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| Deb | tor 1 | | | Simmons | Case number (if known) | | |
|------|----------|---|------------------------------|-----------------------------------|--------------------------------|--------------------|--------------------|
| | | First Name | Middle Name | Last Name | | | |
| 14. | With | nin 2 years before you | filed for bankruptcy, did | you give any gifts or contribu | tions with a total value of m | ore than \$600 | to any charity? |
| | V | No | | | | | |
| | Ħ | Yes. Fill in the details for | r each gift or contribution. | | | | |
| | | Gifts or contributions | - | Describe what you contril | buted | Date you | Value |
| | | that total more than \$ | | | | contributed | |
| | | | | | | | |
| | | Charity's Name | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Number Street | | • | | | |
| | | | | | | | |
| | | City Stat | te Zip Code | | | | |
| Part | 6. | List Certain Losse | s | | | | |
| | О. | | | | | | |
| 15. | With | in 1 year before you fil | ed for bankruptcy or sin | ce you filed for bankruptcy, di | d you lose anything becaus | se of theft, fire, | other disaster, or |
| | | bling? | | | | | |
| | ~ | No | | | | | |
| | Ħ | Yes. Fill in the details. | | | | | |
| | | Describe the property | vou lost and | Describe any insurance c | overage for the loss | Date of your | Value of property |
| | | how the loss occurred | • | Include the amount that insu | | loss | lost |
| | | | | pending insurance claims of | n line 33 of Schedule | | |
| | | | | A/B: Property. | | | |
| | | | | | | | |
| Part | | List Certain Payme | | | | | |
| | | de any attorneys, bankru No Yes. Fill in the details. | ptcy petition preparers, or | credit counseling agencies for se | rvices required in your bankru | ptcy. | |
| | | roc. I ili ili tilo dotalio. | | Description and value of a | any property | Date payment | Amount of |
| | | | | transferred | | or transfer | payment |
| | | | | | , | was made | |
| | | LAW FIRM | | Attorney's Fee - 350.00 | | 10/25/2016 | \$350.00 |
| | | Person Who Was Paid | | | | | |
| | | 11101 S. Western Avenu Number Street | le | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | Chicago Illino | | | | | |
| | | City Stat | e Zip Code | | | | |
| | | Email or website address | :e | | | | |
| | | Email of Website address | | | | | |
| | | Person Who Made the F | Payment, if Not You | | | | |
| | | | | | | | |
| | | Person Who Was Paid | | | | | |
| | | _ | | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | - | | | | | |
| | | City Stat | e Zip Code | | | | |
| | | | | | | | |
| | | Email or website address | SS | | | | |
| | | Email or website addres | SS | | | | |

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| Deb | tor 1 | Latia | | Simmons | Case number (if known |) | |
|-----|-------|---|------------------------|--|----------------------------|---------------------------------------|----------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | nin 1 year before you filed to you deal with your credito not include any payment or tra No Yes. Fill in the details. | rs or to make payments | | r behalf pay or transfer | any property to any | yone who promised to |
| | ш | res. I ili ili trie details. | | | | _ | |
| | | | | Description and value of an transferred | y property | Date payment or transfer was made | Amount of payment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City | Zip Code | | | | |
| | | City State | Zip Code | | | | |
| | trans | Ide both outright transfers and stees that you have already list No Yes. Fill in the details. | | rity (such as the granting of a se | | | |
| | | | | Description and value of an property transferred | | ny property or eceived or debts pa | Date aid transfer was made |
| | | Person Who Received Tran | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person Who Received Tran | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| 19. | | nin 10 years before you file ese are often called asset-pro | | ou transfer any property to a s | self-settled trust or simi | lar device of which | you are a beneficiary? |
| | | No Yes. Fill in the details. | | | | | |
| | Ц | res. r III III tile detalls. | | Description and value of t | he property transferre | d | Date transfer was made |
| | | Name of trust | | | | | |

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| Debto | or 1 | Latia First Name Middle Name | Simmons Last Name | Case | e number (if known) | | |
|--------------|-------------|--|-----------------------------------|-----------------|---------------------------------------|--------------------------------|--------------------------------------|
| Part 8 | 3: | List Certain Financial Accounts, I | | Boxes, and | d Storage Units | | |
| 20. I | With mov | nin 1 year before you filed for bankruptcy, ved, or transferred? Ide checking, savings, money market, or other peratives, associations, and other financial ins | were any financial accounts or i | nstruments h | neld in your name, or fo | | |
| İ | ✓ | No Yes. Fill in the details. | Last 4 digits of account number | Type of instrun | f account or nent | Date account was closed, sold, | Last balance before closing or |
| | | Person Who Was Paid | xxxx- | | ecking | moved, or transferred | transfer |
| | | Number Street | _ | <u></u> Мо | vings ney market okerage ner | | |
| | | City State Zip Code Person Who Was Paid | XXXX- | | ecking | | |
| | | Number Street | <u> </u> | Мо | vings ney market okerage ner | | |
| | | City State Zip Code you now have, or did you have within 1 year valuables? | ar before you filed for bankruptc | y, any safe de | eposit box or other dep | pository for secur | ities, cash, or |
| | ✓ | No Yes. Fill in the details. | W() 1/4 | | Described to the second | | D |
| | | | Who else had access to it? | | Describe the conte | nts | Do you still have it? |
| | | Name of Financial Institution | Name | | | | ☐ No ☐ Yes |
| | | Number Street | Number Street | | | | |
| | | City State Zip Code | City State | Zip Code | | | |
| 22. | Hav | e you stored property in a storage unit or | place other than your home with | nin 1 year bef | ore you filed for bankr | ruptcy? | |
| | | No Yes. Fill in the details. | | · | • | | |
| | | | Who else had access to it? | | Describe the conte | ents | Do you still have it? |
| | | Name of Storage Facility | Name | | | | ☐ No ☐ Yes |
| | | Number Street | Number Street | | | | П 169 |
| | | City State Zip Code | City State — | Zip Code | | | |

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| ebtor 1 | | | Simmons | | se number (if known) | |
|-------------------|---|---|--|-------------------|---|----------------|
| | First Name Middle Name | L | ast Name | | | |
| rt 9: | Identify Property You Hold or Cont | rol for Som | eone Else | | | |
| | | | | | | |
| | you hold or control any property that somed meone. | one else owns | s? Include any | property you b | oorrowed from, are storing for, or hold i | n trust for |
| _ | | | | | | |
| | No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | | Where is t | he property? | | Describe the contents | Value |
| | Owner's Name | No seek as Chr | | | | |
| | Owner's Name | Number Str | eet | | | |
| | Number Street | | | | | |
| | | | | | | |
| | | City | State | Zip Code | | |
| | City State Zip Code | | | | | |
| | _ | | | | | |
| art 10 | Give Details About Environmental | Informatio | n | | | |
| or the | purpose of Part 10, the following definitions apply | <i>r</i> : | | | | |
| | Environmental law means any federal, state, or lo | | egulation conc | erning pollution | contamination releases of | |
| | hazardous or toxic substances, wastes, or materia | | ū | • | • | |
| | including statutes or regulations controlling the cl | - | | . 0 | | |
| | Site means any location, facility, or property as def | fined under anv | environmental | law. whether you | now own, operate, or utilize it | |
| | or used to own, operate, or utilize it, including dis | • | | ,, | | |
| | | | | | | |
| | Hazardous material means anything an environme | ental law define | e as a hazardo | ule wasta hazard | lous substance | |
| • | Hazardous material means anything an environmentoxic substance, hazardous material, pollutant, co | | | ous waste, hazard | lous substance, | |
| - | toxic substance, hazardous material, pollutant, co | ontaminant, or s | similar term. | | lous substance, | |
| - | | ontaminant, or s | similar term. | | lous substance, | |
| ■ eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn | ontaminant, or s now about, rega | similar term. rdless of when | they occurred. | | |
| ■ eport | toxic substance, hazardous material, pollutant, co | ontaminant, or s now about, rega | similar term. rdless of when | they occurred. | | , |
| ■ eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No | ontaminant, or s now about, rega | similar term. rdless of when | they occurred. | | |
| ■ eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo | ontaminant, or s now about, rega | similar term. rdless of when | they occurred. | | |
| ■ eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No | ontaminant, or s now about, rega | similar term. rdless of when | they occurred. | | Date of |
| ■ eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No | ontaminant, or s now about, rega nu may be liab | similar term. rdless of when | they occurred. | or in violation of an environmental law? | |
| ■ eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No | ontaminant, or s now about, rega nu may be liab | similar term. rdless of when le or potentia | they occurred. | or in violation of an environmental law? | Date of |
| ■ eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No Yes. Fill in the details. Name of site | contaminant, or so so so about, regal so may be liable Governmen | similar term. rdless of when le or potentia ental unit | they occurred. | or in violation of an environmental law? | Date of |
| ■ eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No Yes. Fill in the details. | ontaminant, or so | similar term. rdless of when le or potentia ental unit | they occurred. | or in violation of an environmental law? | Date of |
| ■ eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No Yes. Fill in the details. Name of site | Governmen Governmen | similar term. rdless of when le or potentia ental unit ental unit | they occurred. | or in violation of an environmental law? | Date of |
| ■ eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No Yes. Fill in the details. Name of site | contaminant, or so so so about, regal so may be liable Governmen | similar term. rdless of when le or potentia ental unit | they occurred. | or in violation of an environmental law? | Date of |
| ■ eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No Yes. Fill in the details. Name of site | Governmen Governmen | similar term. rdless of when le or potentia ental unit ental unit | they occurred. | or in violation of an environmental law? | Date of |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No Yes. Fill in the details. Name of site Number Street City State Zip Code | Government Struck City | rdless of when the or potential unit the eet | they occurred. | or in violation of an environmental law? | Date of |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No Yes. Fill in the details. Name of site Number Street | Government Struck City | rdless of when the or potential unit the eet | they occurred. | or in violation of an environmental law? | Date of |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo No Yes. Fill in the details. Name of site Number Street City State Zip Code | Government Struck City | rdless of when the or potential unit the eet | they occurred. | or in violation of an environmental law? | Date of |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you have you. No yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any | Government Struck City | rdless of when the or potential unit the eet | they occurred. | or in violation of an environmental law? | Date of |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knus any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any have you notified any governmental unit of any governmental unit of any governmental unit of any governmental unit of any | Government Struck City | similar term. rdless of when le or potentia ental unit stal unit eet State | they occurred. | or in violation of an environmental law? | Date of |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knus any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any have you notified any governmental unit of any governmental unit of any governmental unit of any governmental unit of any | Government Government Number Str City | similar term. rdless of when le or potentia ental unit stal unit eet State | they occurred. | or in violation of an environmental law? | Date of notice |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you have you. No yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any yes. Fill in the details. | Government Government City Government City Government City | ental unit State State State State State State State | they occurred. | or in violation of an environmental law? | Date of notice |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knus any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any have you notified any governmental unit of any governmental unit of any governmental unit of any governmental unit of any | Government Government Number Str City | ental unit State State State State State State State | they occurred. | or in violation of an environmental law? | Date of notice |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you have you. No yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any yes. Fill in the details. | Government Government City Government City Government City | ental unit State | they occurred. | or in violation of an environmental law? | Date of notice |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details. | Government | ental unit State | they occurred. | or in violation of an environmental law? | Date of notice |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details. | Government | ental unit State | they occurred. | or in violation of an environmental law? | Date of notice |
| eport | toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details. | Government | cimilar term. rdless of when the componential unit the componenti | zip Code | or in violation of an environmental law? | Date of notice |

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| Deb | tor 1 | | | | Simmons | Case i | number (if known) | |
|------|----------|-----------------------|------------------|--------------------|-------------------------------|---------------------|--|--------------------|
| | | First Name | | Middle Name | Last Name | | | |
| 26. | Hav | e you been a party | / in any judici | al or administra | tive proceeding under | any environmenta | I law? Include settlements and orders | S. |
| | ✓ | No | | | | | | |
| | Ш | Yes. Fill in the deta | ils. | | | | | |
| | | | | | Court or agency | | Nature of the case | Status of the case |
| | | Case title | | | | | | Pending |
| | | | | | Court Name | | | On appeal |
| | | Case number | | | Number Street | | | Concluded |
| | | | | - | City State | Zip Code | | |
| Part | 11: | Give Details A | bout Your | Business or | Connections to An | y Business | | |
| 27. | With | nin 4 vears before | you filed for | nankruntev did | vou own a business or | have any of the fo | llowing connections to any business | .? |
| | ***** | _ | | | | • | - | • |
| | | | | - | profession, or other activit | | part-time | |
| | | = | | company (LLC) | or limited liability partners | ship (LLP) | | |
| | | A partner in a | | | | | | |
| | | | - | ing executive of | • | | | |
| | | An owner of at | : least 5% of th | e voting or equity | securities of a corporatio | n | | |
| | ~ | No. None of the abo | ove applies. Go | to Part 12. | | | | |
| | П | | | | s below for each business | | | |
| | | | | | | re of the business | Employer Identification n | umber Do not |
| | | | | | | | include Social Security nu | |
| | | | | | _ | | EIN: | |
| | | Business Name | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | | | | Name of account | ant or bookkeeper | | |
| | | City | State | Zip Code | | | FromTo | |
| | | | | | | | | |
| | | | | | Describe the natu | re of the business | | |
| | | | | | | | include Social Security nu | imber or itin. |
| | | Business Name | | | _ | | LIIV. | |
| | | Number Street | | | Name of access | ant or booklesses | Dates business existed | |
| | | City | Ctoto | Zin Co-l- | - Name of accounts | ant or bookkeeper | From To | |
| | | City | State | Zip Code | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | ire of the business | Employer Identification n include Social Security nu | |
| | | Business Name | | | _ | | EIN: | |
| | | Duoineoo Naine | | | _ | | | |
| | | Number Street | | | Name of account | ant or bookkeeper | Dates business existed | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |

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| Debto | _ | | | Simmons | Case number (if known) |
|--------|-------|--|--|-------------------------------|---|
| | | First Name | Middle Name | Last Name | |
| | | in 2 years before you file tors, or other parties. | d for bankruptcy, did yo | u give a financial statemer | nt to anyone about your business? Include all financial institutions, |
| | | No Yes. Fill in the details below | <i>ı</i> . | | |
| | | | | Date issued | |
| | | Name | | MM/DD/YYYY | |
| | | | | | |
| | | Number Street | | - | |
| | | City State | e Zip Code | - | |
| | | on, one | _p = = = = = = = = = = = = = = = = = = = | | |
| Part 1 | 12: | Sign Below | | | |
| tr | ue a | nd correct. I understand uptcy case can result in f | that making a false state | ement, concealing propert | nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /s/ Latia Sin | nmons | | × |
| | | Signature of D | ebtor 1 | | Signature of Debtor 2 |
| | | Date 10/25/20 | 16 | | Date |
| D | id yo | ou attach additional page | es to Your Statement of F | Financial Affairs for Individ | duals Filing for Bankruptcy (Official Form 107)? |
| Ī. | 7 N | | | | |
| Ī | Ye | es | | | |
| D | id yo | ou pay or agree to pay so | meone who is not an att | orney to help you fill out b | ankruptcy forms? |
| · | N | 0 | | | |
| | Y | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B 203 (12/94)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| re | Latia Simmons | Case No. | |
|----|---|--|-----------------------------|
| - | Debtor | | (If known) |
| | | Chapter | Chapter 13 |
| | DISCLOSURE OF COMPENSA | ATION OF ATTORNEY FOR | DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 that compensation paid to me within one year before the services rendered or to be rendered on behalf of the decision is as follows: | ne filing of the petition in bankruptcy, or agre | eed to be paid to me, for |
| | For legal services, I have agreed to accept | | \$2,900.00 |
| | Prior to the filing of this statement I have received | | \$350.00 |
| | Balance Due | | \$2,550.00 |
| 2. | The source of the compensation paid to me was: | | |
| | | (specify) | |
| 3. | The source of the compensation paid to me is: | | |
| | ✓ Debtor Other | (specify) | |
| 4. | I have not agreed to share the above-disclosed comembers and associates of my law firm. | mpensation with any other person unless th | ey are |
| | I have agreed to share the above-disclosed compermembers or associates of my law firm. A copy of the people sharing in the compensation, is attached | the agreement, together with a list of the na | |
| 5. | In return for the above-disclosed fee, I have agreed to a. Analysis of the debtor's financial situation, and a bankruptcy; | - | |
| | b. Preparation and filing of any petition, schedules | s, statements of affairs and plan which may | be required; |
| | c. Representation of the debtor at the meeting of o | creditors and confirmation hearing, and any | adjourned hearings thereof; |
| | d. Representation of the debtor in adversary proce | eedings and other contested bankruptcy ma | tters; |
| 6. | By agreement with the debtor(s), the above-disclosed to | fee does not include the following services: | |
| | | | |
| | CE | RTIFICATION | |
| | I certify that the foregoing is a complete statement of arne debtor(s) in this bankruptcy proceedings. | ny agreement or arrangement for payment t | o me for representation |
| | 10/25/2016 | /s/ Sean McNulty | |
| | Date | Signature of Attorney | |
| | | Semrad Law Firm | |
| | | Name of law firm | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Simmons, Latia | Case No | Case No. | | | |
|--------|---|--|-------------------------------------|-----------|--|--|
| | Debtor(s) | | Ouse No. | | | |
| | | Chapter | Chapter13 | | | |
| | VERIFIC | VERIFICATION OF CREDITOR MATRIX | | | | |
| | The above named Debtors hereby verify the | hat the attached list of creditors is true | and correct to the best of their kr | nowledge. | | |
| Date: | 10/25/2016 | /s/ Simmons, Lati | a. | | | |
| | 19292010 | Simmons, Latia | • | | | |
| | | Signature of Debi | or | | | |

FEDERAL LOAN SERVICE P.O. Box 60610 Harrisburg, PA 17106

FEDERAL LOAN SERVICE P.O. Box 60610 Harrisburg, PA 17106

ENHANCED RECOVERY 8014 BAYBERRY RD JACKSONVILLE, FL 32256

FIRST PREMIER BANK PO Box 7999 c/o Stephen Dirksen Saint Cloud , MN 56302

Medical Payment Data 2525 N. Shadeland Indianapolis , IN 46219

HARRIS 111 WEST JACKSON B SUITE 400 CHICAGO , IL 60604

CREDIT MANAGEMENT LP 4200 INTERNATIONAL PKWY CARROLLTON, TX 75007

ENHANCED RECOVERY 8014 BAYBERRY RD JACKSONVILLE, FL 32256

ENHANCED RECOVERY 8014 BAYBERRY RD JACKSONVILLE, FL 32256

Medical Payment Data 2525 N. Shadeland Indianapolis , IN 46219

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602 Case 16-34066 Doc 1 Filed 10/25/16 Entered 10/25/16 18:03:40 Desc Main Document Page 57 of 68

Palatine, IL 60055

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CAPITAL ONE Po Box 85015 Richmond , VA 23285

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| Debtor 1 Latia First Name | | Simmons | Case number (if known) | |
|---|--|--|--|--|
| | | ast Name | | |
| Part 6: Answer These Qua 16. What kind of debts do you have? | estions for Reporting Purposes 16a. Are your debts primarily "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or in No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you | consumer debts? Cor primarily for a personal business debts? Busin evestment or through the | l, family, or household ness debts are debts th ne operation of the bus | purpose." nat you incurred to obtain siness or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fu | 7. Do you estimate that af | iter any exempt property istribute to unsecured cr | vis excluded and administrative editors? |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 □ 50-99 □ 100-199 □ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,00 | l lum | 25,001-50,000 50,001-100,000 More than 100,000 |
| ^{19.} How much do you estimate your assets to be worth? | | \$1,000,001-\$ \$10,000,001- \$50,000,001- \$100,000,001 | \$50 million \$100 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | | \$1,000,001-\$ \$10,000,001- \$50,000,001- \$100,000,001 | \$50 million \$100 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | I have examined this potition, and | d I declare under penalt | v of perjuly that the in | formation provided is true and |
| | I have examined this petition, and correct. If I have chosen to file under Char of title 11, United States Code. I under Chapter 7. If no attorney represents me and out this document, I have obtained I request relief in accordance with I understand making a false state connection with a bankruptcy car both. 18 U.S.C. §§ 152, 1341, 15 /s/ Latia Simmons Signature of Debtor 1 Executed on 10/25/2016 | apter 7, I am aware that understand the relief available of the relief available of the relief available of the chapter of title 11 ament, concealing properse can result in fines up 519, and 3571: | I may proceed, if eligibly vailable under each chapter of pay someone who is required by 11 U.S.C. of the United States Code, erty, or obtaining mon | ole, under Chapter 7, 11,12, or 13 apter, and I choose to proceed not an attorney to help me fill § 342(b). specified in this petition. ey or property by fraud in isonment for up to 20 years, or |

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| Fill in this infor | mation to identify your c | ase: | | | |
|---------------------------------|---------------------------|--|--|---|--|
| Debtor 1 | Latia | | Simmons | | |
| | First Name | Middle Name | Last Name | - | |
| Debtor 2 (Spouse, if filing) | | | | _ | |
| (Spouse, ir illing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois | _ | |
| Case number | | | (State) | | |
| (If known) | | | | - | |
| Official | Form 106De | | | i de la companya de | ck if this is a nded filing |
| | | | otor's Schedules | | 12/1 |
| If two married r | people are filing togeth | er, both are equally resp | onsible for supplying correct | nformation | |
| U.S.C. §§ 152, 1 | Below | | | | |
| Did you pa | ny or agree to pay some | one who is NOT an atto | rney to help you fill out bankr | uptcy forms? | E-11-30-04-95-0-9-9-9-9-9-9-9-9-9-9-9-9-9-9-9-9-9- |
| ☑ No | | | | | |
| Yes. N | lame of person | | Attach Bankruptcy Pei Signature (Official Fon | ition Preparer's Notice, Declaration, and n 119). | |
| | | | | | |
| | | e that I have read the su | ımmary and schedules filed wi | th this declaration and | |
| that they a | are true and correct. | The state of the s | · | | |

Signature of Debtor 2

MM/DD/YYYY

Date

Date 10/25/2016

MM/DD/YYYY

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| Debtor 1 | 1 Latia First Name | | Middle Name | Simmons Last Name | Case number (if known) |
|------------|--------------------------------|---------------------------------------|--|--|--|
| 28. Wi | was was to see that the see of | before you filed for ther parties. | and the second of the second o | total entrement in the first of the definition of the second control of the second contr | nent to anyone about your business? Include all financial institutions, |
| Ĕ | J. | the details below. | | | |
| | | | | Date issued | |
| | Name | CCCVATARRAN | | MM/DD/YYYY | _ |
| | Number | Street | | | |
| | City | State | Zip Code | | |
| Part 12: | Sign Beld | ow . | | | |
| true | and correct | . I understand that r | naking a false state up to \$250,000 | atement, concealing prop | ments, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | Signature of Debtor 1 | 9000 | | Signature of Debtor 2 |
| | | Date 10/25/2016 | | | Date |
| Did y | ou attach a | dditional pages to Y | our Statement o | f Financial Affairs for Indiv | iduals Filing for Bankruptcy (Official Form 107)? |
| 뜨. | No Yes | | | | |
| Did y | ou pay or ag | ree to pay someone | who is not an a | ttorney to help you fill out | bankruptcy forms? |
| ☑ ¹ | No | | | | |
| 一一 | Yes. Name of | person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Simmons, Latia Debtor(s) | Case No |
|-----------------|---|---|
| | | Chapter. Chapter13 |
| | VERIFICA | TION OF CREDITOR MATRIX |
| TI knowledge | he above named Debtors hereby verify the. | nat the attached list of creditors is true and correct to the best of their |
| Date: | 10/25/2016 | /s/ Simmons, Latia Simmons, Latia Signature of Debtor |

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| Deb | tor 1 Latia | | Simmons | Case number (if known) | | |
|---|---|--|---|--|-------------|--|
| garanti san i | First Name | Middle Name | Last Name | . / | | |
| 16. | Calculate the median family income that applies to you. Follow these steps: | | | | | |
| | 16a. Fill in the state in w | hich you live. | Illinois | | | |
| | 16b. Fill in the number o | of people in your household. | 2 | | | |
| | 16c. Fill in the median fa household | amily income for your state and si | | a list of applicable median income amounts are as line | \$63,896.00 | |
| nousenoid To find a list of applicable median income amounts, go onli using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | | | | | | |
| 17. | 17. How do the lines compare? | | | | | |
| | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | | |
| • | U.S.C. § 1325 | ore than line 16c. On the top of part (b)(3). Go to Part 3 and fill out (ar current monthly income from line) | Calculation of Disposa | k box 2, <i>Disposable income is determined under 11</i> ible Income (Official Form 122C-2). On line 39 of that | | |
| Part | 3: Calculate Your C | ommitment Period Under | 11 U.S.C. §1325(b) | (4) | | |
| 18. | | e monthly income from line 11. | | | \$1,136.67 | |
| 19. | Deduct the marital adju commitment period under | ustment if it applies. If you are i er 11 U.S.C. § 1325(b)(4) allows y | married, your spouse is you to deduct part of yo | not filing with you, and you contend that calculating the our spouse's income, copy the amount from line 13. | | |
| | 19a. If the marital adjustr | ment does not apply, fill in 0 on li | ne 19a. | | -\$0.00 | |
| | 19b. Subtract line 19a | from line 18. | | | \$1,136.67 | |
| 20. | Calculate your current | monthly income for the year. F | follow these steps: | | | |
| | 20a. Copy line 19b. | | | | \$1,136.67 | |
| | Multiply by 12 (the r | number of months in a year). | | | x 12 | |
| | 20b. The result is your cu | rrent monthly income for the yea | r for this part of the for | n. | \$13,640.04 | |
| | 20c. Copy the median far | mily income for your state and siz | e of household from lin | e 16c. | \$63,896.00 | |
| 21. | 21. How do the lines compare? | | | | | |
| | Line 20b is less than commitment period is | line 20c. Unless otherwise ordere s 3 years. Go to Part 4. | ed by the court, on the | op of page 1 of this form, check box 3, The | | |
| | Line 20b is more that 4, <i>The commitment</i> | n or equal to line 20c. Unless oth oeriod is 5 years. Go to Part 4. | erwise ordered by the c | purt, on the top of page 1 of this form, check box | | |
| Part | 4: Sign Below | | | | | |
| | By signing here I dec | Para under penalty of perium that | the information of the | | | |
| | By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. | | | | | |
| | 🗶 /s/ Latia Simn | nons Valla | No mare ex | | | |
| | Signature of Debi | | BOTTING Si | gnature of Debtor 2 | | |
| | Date 10/25/201 | | Da | ate | | |
| | MM/DD/Y | ΥΥ | | MM/DD/YYYY | 3 8 1 | |
| | If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above. | | | | | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to \$ 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$2,900.00 For all of the services outlined above, the attorney will be paid a flat fee of \$2,900.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76

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- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$2,550.00; and \$61.76 for expenses, leaving a balance due of \$2,921.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 10/25/201 | 6 |
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Signed:

/s/ Latia Simmons/

Debtor(s)

/s/ Sean McNulty

Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.